

**Allowances for
Tenant-Furnished Utilities
and Other Services
Effective 1 10/1/2007**

**U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing**

OMB Approval No. 25577-0169 exp. 4/30/2001

See Public Reporting Statement and Instructions on back

Locality			Unit Type					Date	
HAMPDEN/HAMPSHIRE COUNTIES			Multi-Family, Over 4 stories					1-Oct-07	
Utility/Service - Allowance per month			0BR	1BR	2BR	3BR	4BR	5BR	
Heating	a. Natural Gas	24	34	43	54	69	78		
	b. Oil	20	30	37	44	57	67		
	c. Electric	13	18	23	28	35	40		
Cooking	a. Natural Gas	4	7	8	9	12	14		
	b. Electric	8	12	15	19	24	27		
Gen. Electric (incl. Monthly chg)		40	52	64	77	95	108		
Air Conditioning									
Water	a. Natural Gas	15	20	26	32	41	46		
Heating	b. Oil	17	22	30	37	47	52		
	c. Electric	20	27	35	43	55	63		
Water									
Sewer									
Trash Collection (*)									
Range/Microwave		10	10	10	10	10	10		
Refrigerator		10	10	13	13	13	13		
Other --specify-gas min.charge		10	10	10	10	10	10		

Actual Family Allowances To be used by the family to compute allowance. Cost per month allowance

Complete below for the actual unit rented.

Name of Family	Heating	\$	
Address of Unit	Cooking		
	Other electric		
	Air Conditioning		
	Water Heating		
	Water		
	Sewer		
	Trash Collection		
	Range/Microwave		
	Refrigerator		
	Other:		
Number of Bedrooms		Total	\$

form HUD-52667 (12/97) ref.
Handbook 7420.8

Previous editions are obsolete

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OMB Approval No. 25577-0189 exp. 4/30/2001

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Locality		Unit Type		Date			
HAMPDEN/HAMPSHIRE COUNTIES		Multi-Family, Over 4 stories		1-Oct-07			
Utility/Service - Allowance per month							
		6BR	7BR	8BR	9BR	10BR	11BR
Heating	a. Natural Gas	88	97	107	117	127	136
	b. Oil	76	84	92	101	109	117
	c. Electric	46	51	56	61	66	71
Cooking	a. Natural Gas	17	19	21	23	25	27
	b. Electric	30	34	37	41	44	47
Gen. Electric (incl. Monthly chg)		120	133	145	158	170	183
Air Conditioning							
Water Heating	a. Natural Gas	54	60	65	71	77	83
	b. Oil	58	64	71	77	83	90
	c. Electric	71	78	86	94	102	110
Water							
Sewer							
Trash Collection (*)							
Range/Microwave		10	10	10	10	10	10
Refrigerator		13	13	13	13	13	13
Other --specify-gas min.charge		10	10	10	10	10	10
Actual Family Allowances To be used by the family to compute allowance.						Cost per month allowance	
Complete below for the actual unit rented.							
Name of Family						Heating	
						Cooking	
						Other electric	
						Air Conditioning	
Address of Unit						Water Heating	
						Water	
						Sewer	
						Trash Collection	
						Range/Microwave	
						Refrigerator	
Number of Bedrooms						Other:	
						Total	
						\$	
						form HUD-52667 (12/97) ref.	
						Handbook 7420.8	
Previous editions are obsolete							